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Fees pursuant to the	Docket Number (Optional) 02755/100J524-US1				
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Application Number 10/736,049-Conf. #4045			Filed December 15, 2003		
For TRANSDERMAL BUPRENORPHINE TO TREAT PAIN IN SICKLE CELL CRISIS					
Art Unit 3762			Examiner	S. E. Ker	nedy
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
•		<u>Fee</u>	Small Entity	Fee	
x One mont	h (37 CFR 1.17(a)(1))	\$120	\$60		
X Two mont	hs (37 CFR 1.17(a)(2))	\$450	\$225	\$	450.00
Three months (37 CFR 1.17(a)(3))		\$1020	\$510	\$	
Four months (37 CFR 1.17(a)(4))		\$1590	\$795	\$	
Five months (37 CFR 1.17(a)(5))		\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. X Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number					
applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
x	attorney or agent of record. R	* *		•	
	attorhey or agent under 37 CF Registration number if acting un	R 1.34.			
			May 24, 2007		
/ V Signature			Date		
Paul M. Zagar Typed or printed name			(212) 527-7700 Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of	1 forms are subm	nitted.			